



March 10, 2005

## **Podiatrist pays \$200,000 for fraudulent Medicare billing**

**Gaetano Calise**, a podiatrist with offices in Providence and Johnston, has paid the United States \$200,000 to settle claims that he fraudulently billed Medicare for services that he did not provide to nursing home patients and treatments that he misrepresented. Calise is also permanently barred from participating in all federal health care programs, including Medicare and Medicaid.

United States Attorney Robert Clark Corrente and Joseph Moraski, Special Agent in Charge of the Boston Regional Office of the Department of Health and Human Services, Office of Inspector General, jointly announced a Settlement Agreement, which Calise reached with the government to avert a lawsuit under the False Claims Act and other federal statutes.

Treatments that Calise gave to patients at various nursing homes in Rhode Island were the basis of the Settlement Agreement. The government contends in the Settlement Agreement that it has civil claims against Calise for engaging in the following fraudulent billing practices between January 1998 and September 2004: billing Medicare for services not rendered to patients; billing Medicare for services not covered by Medicare but misrepresenting them as covered services; and making false representations in patient charts.

Assistant U.S. Attorney Lisa Dinerman pursued the case as part of the **Affirmative Civil Enforcement (ACE)** program, through which the U.S. Attorney seeks to recover money fraudulently obtained from the government.